2019-12.4 28624U

## Telecommunications Carriers

## **AUTHORIZED UTILITY REPRESENTATIVE FORM**

	CERTI	FICATED COM	PANY INFORMAT	ION		
Company Name: IM Telecom, LLC				FEIN/SSI		
DBA/FKA: Infiniti Mobile				Telephone #214-323-8410		
Mailing Address: 13601 Pres	ston Rd, Ste.	816E				
City:Dallas	State:TX			ZIP Code:75240		
ILEC	IXC		CLEC		Wireless ETC X	
	REC	GISTERED AGE	NT INFORMATIO	N		
Registered Agent:Incorp Se	rvices, Inc					
Mailing Address: 317 Ruth	∕ista Rd					
City:Lexington	State:SC			ZIP Code:29073		

As required by Commission rules and regulations
Print or type company contact person and contact information for the areas listed below:

	UTILI1	Y REPRESENTATIVE INFORM	NOITAN
General Manager			
Name:Paul LaPier			
Address: 13601 Preston F	Rd, Ste. 816E		
City:Dallas		State:TX	ZIP Code:75240
Phone:214-323-8430	Email:plap	pier@infinitimobile.com	Fax:
Emergency Contact -	Non Office Hou	irs	
Name:Nick Metherd			
Phone:214-323-8450	Email:nme	etherd@infinitimobile.com	Fax:
Customer Relations/C	omplaints Rep		
Name:Nick Metherd			
Address: See above			
City:		State:	ZIP Code:
Phone:	Email:		Fax:
Complaints Rep for Co	mplaint Escala	tion	
Name: Nick Metherd			<u> </u>
Address: See above			
City:		State:	ZIP Code:
Phone:	Email:		Fax:
Customer Toll Free Co	ntact Number:		
Engineering Operation	ıs		
Name:N/A	-		
Address:			MAN
City:		State:	ZIP Code: NO OSO
Phone:	Email:	ail: Fax: SYOS	
Test and Repair			and of
Name:N/A			ZIP Code: SING OF THE STATE OF
Address:			A A A A
City:		State:	ZIP Code:
Phone:	Email:	Email: Fax:	

	UTILIT	TY REPRESENTATIVE INFORMA	TION		
Regulatory Officer		The second secon			
Name & Title:Paul LaPier; Vic	e Presiden	t of Finance			
Address:13601 Preston Rd, S	te. 816E				
City:Dallas	State:TX		ZIP Code:75240		
Phone:214-323-8430	Email:plapier@infinitimobile.com		Fax:		
Annual Report Form Mailin	igs				
Name & Title:Susan Cockerha	am; FasTek	c; Attorney in Fact			
Address:1725 Windward Cond	course, Ste	150			
City:Alpharetta		State:GA		Code:30005	
Phone:678-672-2837	Email:scockerham@fastekteam.com		Fax:678-672-2830		
<b>Dual Party Invoice Mailing</b>	s				
Name & Title:Susan Cockerha	am, FasTel	k, Attorney in Fact			
Address:see above					
City:		State:	ZIP	Code:	
Phone:	Email:		Fax:		
Universal Service Fund Ma	ilings				
Name & Title:Susan Cockerha	am, FasTel	k, Attorney in Fact	manda a a a a a a a a a a a a a a a a a a		
Address:see above					
City:		State:		ZIP Code:	
Phone:	Email:		Fax:	Fax:	
<b>Gross Receipts Mailings</b>			Margaret 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Name & Title:Susan Cockerha	am, FasTel	k, Attorney in Fact			
Address:see above					
City:	State:		ZIP	Code:	
Phone:	Email:		Fax:		
Lifeline Contact					
Name & Title: Nick Metherd			MARAMAN COMMUNICATION OF THE PROPERTY COMMUNICATION OF THE COMMUNICATION		
Address:13601 Preston Rd, S	te. 816E				
City:Dallas		State:TX	ZIP Code:75240		
Phone: 214-323-8450	Email:nm	etherd@infinitimobile.com	Fax:		

FORM PREPARER INFORMA	ATION
This form was completed by: Paul LaPier	
Signature: Oawl N -	
Title: Vice President of Finance	Date: 07/23/2019

RETURN COMPLETED FORM TO:

Public Service Commission of SC

**Docketing Department** 

101 Executive Center Drive, Suite 100

Columbia, SC 29210

Office of Regulatory Staff

AND Attn. Kari Munn

1401 Main Street, Suite 800

Columbia, SC 29201